

AUBURN UNIVERSITY INSTITUTIONAL REVIEW BOARD for RESEARCH INVOLVING HUMANSUBJECTS
RESEARCH PROTOCOL REVIEW FORM

For Information or help contact **THE OFFICE OF HUMAN SUBJECTS RESEARCH**, 307 Samford Hall, Auburn University
Phone: 334-844-5966 **e-mail:** hsubjec@auburn.edu **Web Address:** <http://www.auburn.edu/research/vpr/ohs/>

*Complete this form using Adobe Acrobat **Writer** (versions 5.0 and greater). Hand written copies not accepted.*

1. PROPOSED START DATE of STUDY: March 10, 2011

PROPOSED REVIEW CATEGORY (Check one): ☐ FULL BOARD ☒ EXPEDITED ☐ EXEMPT

2. PROJECT TITLE: Children's understanding of batting and fielding games

3. Peter Hastie	Professor	Kinesiology	4-1469	hastipe@auburn.edu
PRINCIPAL INVESTIGATOR	TITLE	DEPT	PHONE	AU E-MAIL
2050 Memorial Coliseum, Campus		4-1467		
MAILING ADDRESS		FAX		ALTERNATE E-MAIL

4. SOURCE OF FUNDING SUPPORT: ☒ Not Applicable ☐ Internal ☐ External Agency: _____ ☐ Pending ☐ Received

5. LIST ANY CONTRACTORS, SUB-CONTRACTORS, OTHER ENTITIES OR IRBs ASSOCIATED WITH THIS PROJECT:

6. GENERAL RESEARCH PROJECT CHARACTERISTICS

6A. Mandatory CITI Training

Names of key personnel who have completed CITI:
Peter Hastie

CITI group completed for this study: ☒ Social/Behavioral ☐ Biomedical

Protocol-Specific modules completed:

- | | |
|--|---|
| <input type="checkbox"/> Genetic | <input type="checkbox"/> Vet's Administration |
| <input type="checkbox"/> International | <input type="checkbox"/> Prisoner Research |
| <input checked="" type="checkbox"/> Public School Students | <input type="checkbox"/> Pregnant Women/Fetuses |
| Other _____ | |

6B. Research Methodology

Please check all descriptors that best apply to the research methodology.

Data Source(s): ☒ New Data ☐ Existing Data

Will data be recorded so that participants can be directly or indirectly identified?
☒ Yes ☐ No

Data collection will involve the use of:

- | | |
|---|---|
| <input type="checkbox"/> Educational Tests (cognitive diagnostic, aptitude, etc.) | <input checked="" type="checkbox"/> Interview / Observation |
| <input type="checkbox"/> Surveys / Questionnaires | <input type="checkbox"/> Physical / Physiological Measures or Specimens (see Section 6E.) |
| <input type="checkbox"/> Internet / electronic | <input type="checkbox"/> Private records or files |
| <input checked="" type="checkbox"/> Audio / Video / Photos | |

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4/5/11 to 4/4/12
Protocol # 11-055 EP 1104

6C. Participant Information

Please check all descriptors that apply to the participant population.

☒ Males ☒ Females ☐ AU students

Vulnerable Populations

- | | |
|---|--|
| <input type="checkbox"/> Pregnant Women/Fetuses | <input checked="" type="checkbox"/> Children and/or Adolescents (under age 19 in AL) |
| <input type="checkbox"/> Prisoners | |

Persons with:

- | | |
|--|--|
| <input type="checkbox"/> Economic Disadvantages | <input type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Educational Disadvantages | <input type="checkbox"/> Intellectual Disabilities |

Do you plan to compensate your participants? ☐ Yes ☐ No

6D. Risks to Participants

Please identify all risks that participants might encounter in this research.

- | | |
|--|--------------------------------------|
| <input checked="" type="checkbox"/> Breach of Confidentiality* | <input type="checkbox"/> Coercion |
| <input type="checkbox"/> Deception | <input type="checkbox"/> Physical |
| <input type="checkbox"/> Psychological | <input type="checkbox"/> Social |
| <input type="checkbox"/> None | <input type="checkbox"/> Other _____ |

*Note that if the investigator is using or accessing confidential or identifiable data, breach of confidentiality is always a risk.

6E. Institutional Biosafety Approval

Do you need IBC Approval for this study? ☒ No ☐ Yes - BUA # _____ Expiration date _____

FOR OHSR OFFICE USE ONLY

DATE RECEIVED IN OHSR: <u>2-14-11</u> by <u>GB</u>	PROTOCOL # <u>11055 EP 1104</u>
DATE OF IRB REVIEW: <u>4/5/11</u> by <u>FW</u>	APPROVAL CATEGORY: <u>45 CFR 46.110 (b,7)</u>
DATE OF IRB APPROVAL: _____ by _____	INTERVAL FOR CONTINUING REVIEW: <u>1 year</u>
COMMENTS: <u>revisions received 4/21/11; reviewed 4/24/11 - SRA</u>	

FEB 14 2011

7. PROJECT ASSURANCES

PROJECT TITLE: Children's understanding of batting and fielding games

A. PRINCIPAL INVESTIGATOR'S ASSURANCES

1. I certify that all information provided in this application is complete and correct.
2. I understand that, as Principal Investigator, I have ultimate responsibility for the conduct of this study, the ethical performance of this project, the protection of the rights and welfare of human subjects, and strict adherence to any stipulations imposed by the Auburn University IRB.
3. I certify that all individuals involved with the conduct of this project are qualified to carry out their specified roles and responsibilities and are in compliance with Auburn University policies regarding the collection and analysis of the research data.
4. I agree to comply with all Auburn policies and procedures, as well as with all applicable federal, state, and local laws regarding the protection of human subjects, including, but not limited to the following:
 - a. Conducting the project by qualified personnel according to the approved protocol
 - b. Implementing no changes in the approved protocol or consent form without prior approval from the Office of Human Subjects Research
 - c. Obtaining the legally effective informed consent from each participant or their legally responsible representative prior to their participation in this project using only the currently approved, stamped consent form
 - d. Promptly reporting significant adverse events and/or effects to the Office of Human Subjects Research in writing within 5 working days of the occurrence.
5. If I will be unavailable to direct this research personally, I will arrange for a co-investigator to assume direct responsibility in my absence. This person has been named as co-investigator in this application, or I will advise OHSR, by letter, in advance of such arrangements.
6. I agree to conduct this study only during the period approved by the Auburn University IRB.
7. I will prepare and submit a renewal request and supply all supporting documents to the Office of Human Subjects Research before the approval period has expired if it is necessary to continue the research project beyond the time period approved by the Auburn University IRB.
8. I will prepare and submit a final report upon completion of this research project.

My signature indicates that I have read, understand and agree to conduct this research project in accordance with the assurances listed above.

Peter Hastie

Printed name of Principal Investigator



Principal Investigator's Signature

February 11, 2011

Date

B. FACULTY ADVISOR/SPONSOR'S ASSURANCES

1. By my signature as faculty advisor/sponsor on this research application, I certify that the student or guest investigator is knowledgeable about the regulations and policies governing research with human subjects and has sufficient training and experience to conduct this particular study in accord with the approved protocol.
2. I certify that the project will be performed by qualified personnel according to the approved protocol using conventional or experimental methodology.
3. I agree to meet with the investigator on a regular basis to monitor study progress.
4. Should problems arise during the course of the study, I agree to be available, personally, to supervise the investigator in solving them.
5. I assure that the investigator will promptly report significant adverse events and/or effects to the OHSR in writing within 5 working days of the occurrence.
6. If I will be unavailable, I will arrange for an alternate faculty sponsor to assume responsibility during my absence, and I will advise the OHSR by letter of such arrangements. If the investigator is unable to fulfill requirements for submission of renewals, modifications or the final report, I will assume that responsibility.
7. I have read the protocol submitted for this project for content, clarity, and methodology

Printed name of Faculty Advisor / Sponsor

Signature

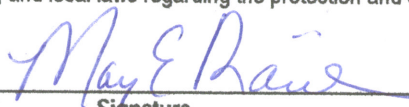
Date

C. DEPARTMENT HEAD'S ASSURANCE

By my signature as department head, I certify that I will cooperate with the administration in the application and enforcement of all Auburn University policies and procedures, as well as all applicable federal, state, and local laws regarding the protection and ethical treatment of human participants by researchers in my department.

Mary Rudisill

Printed name of Department Head



Signature

February 11, 2011

Date

8. PROJECT OVERVIEW: Prepare an abstract that includes:

(400 word maximum, in language understandable to someone who is not familiar with your area of study):

- I.) A summary of relevant research findings leading to this research proposal, (Cite sources; include a "Reference List" as Appendix A.)**
- II.) A brief description of the methodology,**
- III.) Expected and/or possible outcomes, and,**
- IV.) A statement regarding the potential significance of this research project.**

I.) There has been a suggestion physical education lessons in which students design their own games promotes a greater understanding of the rules, tactics and strategies that underpin games. Nonetheless, the studies that have formally investigated games making to date have focused on students in high schools. The purpose of this study is to explore the perceptions of a cohort of fifth grade students following their participation in a unit in which they created their batting the fielding games (ie, games such as softball, baseball, kickball etc).

II.) In small groups (three or four participants) students will participate in a 15-minute interview in which they will be asked to describe the way in which they went about designing their games, what rules they selected (and why), and what equipment they used (and why). Sample questions will include "Tell me how you first got started designing your game", "What was the biggest challenge you faced during the unit?", "Do you think you spent more time planning the game, or experimenting with in action? ", "Why did you select the specific rules you included in your game?". Interviews will take place during regularly scheduled physical education lesson in the students' classroom. Analysis of the interviews will involve identifying common themes from the conversations. The physical education teacher and the teacher's aide will also be interviewed (separately).

III.) The outcomes from the analysis of the interviews will be increased understanding of the impact of student designed games in the learning process of physical education, particularly in terms of games appreciation.

IV.) Existing literature suggests that some students should benefit from game making as it provides them with a platform to experiment with games rules and strategies, and also become more knowledgeable about how games work This study is significant in that it gives us data about how younger students develop processes of game appreciation.

9. PURPOSE.

- a. Clearly state all of the objectives, goals, or aims of this project.**

The goal of this project is to determine what processes fifth-grade students take when faced with the challenge of designing their own games. The sub-goals are to determine the extent of learning about games that this instructional pedagogy produces, as well as providing the key elements that are critical to successful games creation by children.

- b. How will the results of this project be used? (e.g., Presentation? Publication? Thesis? Dissertation?)**

The results of this project will be used to write a paper for publication and may be used in presentations at academic meetings.

Principle Investigator Peter Hastie Title: Professor E-mail address hastipe@auburn.edu
Dept / Affiliation: Kinesiology (faculty)

Roles/Responsibilities:
Liaison with the school.
Conducting the interviews.

Roles / Responsibilities:

Roles / Responsibilities:

Roles / Responsibilities:

Roles / Responsibilities:

Roles / Responsibilities:

Data will be collected in a classroom at Cary Woods Elementary School, Auburn, Alabama. Permission from the principal is provided in Appendix E.

12. PARTICIPANTS.

a. Describe the participant population you have chosen for this project.

(If data are existing, check here ☐ and describe the population from whom data were collected.)
Students in the fifth grade from Cary Woods Elementary School are the participants in this study.

b. Describe why is this participant population is appropriate for inclusion in this research project. (Include criteria for selection.)
Previous research on student designed games has focused on high school grade students. There are no data on elementary school populations.

c. Describe, step-by-step, all procedures you will use to recruit participants. Include in Appendix B a copy of all e-mails, flyers, advertisements, recruiting scripts, invitations, etc., that will be used to invite people to participate.

(See sample documents at <http://www.auburn.edu/research/vpr/ohs/sample.htm>.)

Students will be visited during their physical education lesson.

Researcher will use the script (see attached) to explain to students the intent of the project and the method of data collection.

Students who show interest will be given a copy of the informed consent documents.

What is the minimum number of participants you need to validate the study? ²⁰ _____

Is there a limit on the number of participants you will recruit? ☐ No ☒ Yes – the number is ⁴⁸ _____

Is there a limit on the number of participants you will include in the study? ☒ No ☐ Yes – the number is _____

d. Describe the type, amount and method of compensation and/or incentives for participants.

(If no compensation will be given, check here ☒.)

Select the type of compensation: ☐ Monetary ☐ Incentives

☐ Raffle or Drawing incentive (Include the chances of winning.)

☐ Extra Credit (State the value)

☐ Other

Description:

13. PROJECT DESIGN & METHODS.

a. Describe, step-by-step, all procedures and methods that will be used to consent participants.

(☐ Check here if this is "not applicable"; you are using existing data.)

1. The researchers will visit the students during their normal physical education class time.
2. We will then give the students the information sheet and consent form for them to take home to their parents/guardians.
3. Students and their parents can then contact us as per consent form.
4. Those willing to participate can return the required forms.

b. Describe the procedures you will use in order to address your purpose. Provide a step-by-step description of how you will carry out this research project. Include specific information about the participants' time and effort commitment. (NOTE: Use language that would be understandable to someone who is not familiar with your area of study. Without a complete description of all procedures, the Auburn University IRB will not be able to review this protocol. If additional space is needed for this section, save the information as a .PDF file and insert after page 6 of this form.)

1. Students will be recruited during one of their physical education lessons.
2. Interested students will receive the consent letter to take home at this time.
3. Following return of the consent letters, an interview schedule will be developed.
4. Interviews will be conducted during one-half of one physical education lesson. These will take place in the students' home classroom.
5. Interviews will be recorded on a hand-held digital microphone. Students will not be required to give their names, and no names will be recorded on paper.
6. At the time of the interview, the student will be given the scripted prompt before the recording device is turned on. (see attached)

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3. Students and their parents can then contact us as per consent form.
4. Those willing to participate can return the required forms.

b. Describe the procedures you will use in order to address your purpose. Provide a step-by-step description of how you will carry out this research project. Include specific information about the participants' time and effort commitment. *(NOTE: Use language that would be understandable to someone who is not familiar with your area of study. Without a complete description of all procedures, the Auburn University IRB will not be able to review this protocol. If additional space is needed for this section, save the information as a .PDF file and insert after page 6 of this form.)*

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4. Interviews will be conducted during one-half of one physical education lesson. These will take place in the students' home classroom.
5. Interviews will be recorded on a hand-held digital microphone. Students will not be required to give their names, and no names will be recorded on paper.
6. At the time of the interview, the student will be given the following prompt before the recording device is turned on "I would like to ask you some questions about the games making unit you just completed. If you don't want to answer a particular question, that's ok, just say you don't want to. None of your answers will be given to your teacher. If you don't want to be interviewed, then that's 'ok' too. If you feel 'ok' with me recording your answers, then we can begin." ... at this point the student can select to withdraw or continue.

13c. List all data collection instruments used in this project, in the order they appear in Appendix C.

(e.g., surveys and questionnaires in the format that will be presented to participants, educational tests, data collection sheets, interview questions, audio/video taping methods etc.)

What did you like about the unit?

Tell me about how you began to design your game?

What were some of the things you found easy? [prompt with equipment, rules, tactics]

What was the biggest challenge you faced during the unit?

Do you think you spent more time planning the game, or experimenting with in action?

Why did you select the specific rules you included in your game?

d. Data analysis: Explain how the data will be analyzed.

1. Analysis of the interviews will involve identifying common themes from the conversations.
2. From the interviews, what were the various processes that students went through to design their games.
3. How successful were the games themselves [from interviews with teachers]

14. RISKS & DISCOMFORTS: List and describe all of the risks that participants might encounter in this research. If you are using deception in this study, please justify the use of deception and be sure to attach a copy of the debriefing form you plan to use in Appendix D. (Examples of possible risks are in section #6D on page 1.)

There are no risks to the participants in this study other than a breach of confidentiality.

15. **PRECAUTIONS.** Identify and describe all precautions you have taken to eliminate or reduce risks as listed in #14. If the participants can be classified as a "vulnerable" population, please describe additional safeguards that you will use to assure the ethical treatment of these individuals. Provide a copy of any emergency plans/procedures and medical referral lists in Appendix D.

Interviews will be transcribed the same day they are recorded.

The researcher will complete these transcriptions, and only he will have access to the audio file following the interview.

Recall that no identifiable information of students in on the tapes (other than their voice). Once the transcription has been made, the tapes will be erased.

The interview script will list students as only "Student 1", or "Student 4" etc. Pseudonyms will be used in the writing of any papers that are subsequently written.

If using the Internet to collect data, what confidentiality or security precautions are in place to protect (or not collect) identifiable data? Include protections used during both the collection and transfer of data.

(These are likely listed on the server's website.)

The internet will not be used.

16. **BENEFITS.**

- a. List all realistic direct benefits participants can expect by participating in this specific study.
(Do not include "compensation" listed in #12e.) Check here if there are no direct benefits to participants. ☒

- b. List all realistic benefits for the general population that may be generated from this study.

The "general population" with potential benefit from this study will be elementary school physical education teachers and their students. The benefits that would be generated relate only to the knowledge for teachers or how students learn about games through design processes.

17. PROTECTION OF DATA.

- a. Will data be collected as anonymous? ☐ Yes ☒ No *If "YES", skip to part "g".*
("Anonymous" means that you will not collect any identifiable data.)
- b. Will data be collected as confidential? ☒ Yes ☐ No
("Confidential" means that you will collect and protect identifiable data.)
- c. If data are collected as confidential, will the participants' data be coded or linked to identifying information?
☐ Yes (If so, describe how linked.) No ☒

d. Justify your need to code participants' data or link the data with identifying information.

e. Where will code lists be stored? (Building, room number?)

- f. Will data collected as "confidential" be recorded and analyzed as "anonymous"? ☒ Yes ☐ No
(If you will maintain identifiable data, protections should have been described in #15.)
- g. Describe how and where the data will be stored (e.g., hard copy, audio cassette, electronic data, etc.), and how the location where data is stored will be secured in your absence. For electronic data, describe security. If applicable, state specifically where any IRB-approved and participant-signed consent documents will be kept on campus for 3 years after the study ends.

All of the audio collected from the interviews and all consent forms will be stored in the researchers office.
Interview transcriptions will be stored as a file with password protection on the researcher's computer.
Consent forms will be stored in a locked filing cabinet in the office.
Office location is MC 2081.

h. Who will have access to participants' data?
(The faculty advisor should have full access and be able to produce the data in the case of a federal or institutional audit.)
Only the researcher will have access to the original digital voice files.

i. When is the latest date that confidential data will be retained? (Check here if only anonymous data will be retained. ☒)

j. How will the confidential data be destroyed? (NOTE: Data recorded and analyzed as "anonymous" may be retained indefinitely.)
Files on the digital voice recorder are simply erased, in the same manner as any other electronic file.



AUBURN

UNIVERSITY

COLLEGE OF EDUCATION

DEPARTMENT OF KINESIOLOGY

(NOTE: DO NOT SIGN THIS DOCUMENT UNLESS AN IRB APPROVAL STAMP
WITH CURRENT DATES HAS BEEN APPLIED TO THIS DOCUMENT.)

PARENTAL PERMISSION/CONSENT

for a Research Study entitled

"Children's understanding of batting and fielding games"

Your child is invited to participate in a research study to examine students understanding of batting and fielding games. The study is being conducted by Dr. Peter Hastie of the Auburn University Department of Kinesiology. Your child was selected as a possible participant because he or she was involved in a recent games making conducted by his physical education teacher, Chuck Cooper. Since your child is age 18 or younger we must have your permission to include him/her in the study.

What will be involved if your child participates? If you decide to allow your child to participate in this research study, your child will participate in a 15 minute interview that will cover questions related to the batting and fielding games the students made. The study will last just 2 days and should be completed before the end of the school year. I am asking for your permission to record the interview and later transcribe it. After the interview is transcribed, the voice record will be erased. No identifying information will be collected other than voice, and I will be the only person who has access to the recordings. Further, if any of the actual transcript is ever used in a presentation or publication, I will use a pseudonym for your child's name.

Are there any benefits to your child or others? If your child participates in this study, they will help contribute to developing quality physical education programs and better teaching practices for all physical educators.

If you (or your child) change your mind about your child's participation, your child can be withdrawn from the study at any time. Your child's participation is completely voluntary. If you choose to withdraw your child, your child's data can also be withdrawn. Your decision about whether or not to allow your child to participate or to stop participating will not jeopardize you or your child's future relations with Auburn University, the Department of Kinesiology.

Your child's privacy will be protected. Any information obtained in connection with this study will remain anonymous. The data collected will be protected by Peter Hastie. Information obtained through your child's participation may be used to be published in a professional journal or presented at a professional meeting.

If you (or your child) have questions about this study, please ask them now or contact Peter Hastie at 334-844-1467. A copy of this document will be given to you to keep.

If you have questions about your child's rights as a research participant, you may contact the Auburn University Office of Human Subjects Research or the Institutional Review Board by phone (334)-844-5966 or e-mail at hsubjec@auburn.edu or IRBChair@auburn.edu.

Parent/Guardian Initials _____

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Protocol # 11-055 EP 1104

2050 BEARD-EAVES

MEMORIAL COLISEUM

AUBURN, AL 36849-5323

TELEPHONE:

334-844-4483

FAX:

334-844-1467

HAVING READ THE INFORMATION PROVIDED, YOU MUST DECIDE
WHETHER OR NOT YOU WISH FOR YOUR CHILD TO PARTICIPATE IN THIS
RESEARCH STUDY. YOUR SIGNATURE INDICATES YOUR WILLINGNESS TO
ALLOW YOUR CHILD TO PARTICIPATE.

Assent from your child will be obtained at the time of interview and they will be free to
say "no".

Parent/Guardian Signature

Investigator obtaining consent Date

Printed Name

Printed Name

Date

Child's Signature

Printed Name

Date

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